

SEP 27 1993

1 CASE NUMBER 930825CCC1523 <i>H 9360000</i>		2 INVESTIGATOR ID 8 2 1 3		3 OFFICE CODE 8 0 0		EPIDEMIOLOGIC INVESTIGATION REPORT	
4 ACCIDENT DATE 9 3 0 6 0 7		5 IDI INITIATED 9 3 0 9 0 2					
6 SYNOPSIS OF ACCIDENT OR COMPLAINT A toaster oven caught fire while a woman was using it to make toast on the kitchen counter of her house. No injuries occurred.							
7 LOCATION House (Home-Kitchen) 1 0			8 CITY Brooklyn			9 STATE NY	
10a FIRST PRODUCT Toaster Oven			11a TRADE/BRAND NAME/MODEL Model TR20TY2 Black & Decker Mfg. Co., 6 Armstrong Road Shelton, CT 06484				
10b SECOND PRODUCT <i>Counter</i>			11b TRADE/BRAND NAME/MODEL <i>186</i>				
12 AGE OF VICTIM 0 3 5		13 SEX 2	14 DISPOSITION No Injury 0		15 INJURY DIAGNOSIS No Injury 7 0		
16 BODY PART No Injury 9 9		17 RESPONDENTS Victim 1		18 INVESTIGATION TYPE 2		19 TIME SPENT 0 8 . 0	
20 ATTACHMENTS No Attachments 0		21 CASE SOURCE Consumer Complaint 0 7		22 REVIEWED BY 8 1 6 5 9 3 0 9 2 2			
23 PERMISSION TO DISCLOSE NAMES (NON-NEISS CASES ONLY) XXX CPSC may disclose my name _____ CPSC may not disclose my name							
24 Narrative				25 REGIONAL DIRECTOR REVIEW DATE			

X 9/13/93

930825CCC1523

PRE-ACCIDENT

On the evening of 6/7/93 a 35 year old woman was in the kitchen of her house. There was a toaster oven on the kitchen counter. The cord was plugged into the wall outlet. The woman placed a slice of bread in the toaster. The control was on the "high" setting. The toaster was used about two (2) or three (3) times a week for the last two (2) years without incident.

ACCIDENT

Within a few seconds after the toaster's control was placed on the "high" setting, the woman smelled a burning odor. She saw a two (2) inch high flame coming from behind the control knob bread lever and indicator light which are located next to each other on the front right of toaster oven. The woman unplugged the cord from the wall outlet. The fire self-extinguished. No injuries occurred.

POST ACCIDENT

The woman informed the manufacturer about the accident. She sent the toaster oven to the manufacturer. The manufacturer sent her a new toaster oven.

PRODUCT IDENTIFICATION

The Model TR20TY2 toaster oven was manufactured by Black & Decker Manufacturing Co., 6 Armstrong Road, Shelton, CT 06484.

ACCIDENT INVESTIGATION REQUEST FORM

6 P III

Document Number H360000DA0

Date of Incident ~~8/1~~ 6/7/93 Category I.D. SECT04

Follow-Up Requested

Hazard Analysis

Section 15

Type Follow-Up Requested

Telephone Call

On-Site

Headquarters Contact RRauchschwallbe

Assignment Message Verify accident scenario. Obtain product.

Person(s) to Contact ① Vicki Dawson
NY, NY

718-331-9003 (H)

212-264-7853 (W)

Guideline

Requested By RR

Task Number 930825CCC1523

Assigned to NYC

Date 930825

CONSUMER PRODUCT INCIDENT REPORT

FOR OFFICIAL USE ONLY

1. NAME OF RESPONDENT Vicki Dawer		2. PHONE NO. (HOME) WORK 718-331-9003 212-264-7853	
3. STREET ADDRESS P.O. Box 7437		4. CITY STATE ZIP CODE New York NY 10116	
5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES (USE 2ND PGE IF NEEDED) Consumer placed a piece of bread in toaster on high setting. Two seconds later, consumer smelled a burning odor and saw a 2" high flame coming from behind the control knob bread lever and indicator light which are located next to each other on front right of toaster oven. Consumer unplugged toaster and flame self-extinguished. Consumer examined toaster and found indicator light melted. -cont-			
6. DATE OF INCIDENTS 6/7/93	7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX AND DESCRIBE INJURY: 0 YR/N none	8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME none RELATIONSHIP none	
9. DESCRIPTION OF PRODUCT electric toaster oven		10. BRAND NAME Black & Decker	
11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE Black & Decker unknown Shelton, CT (zip code unknown) 203-926-3000 unknown unknown unknown		12. MODEL, SERIAL NUMBERS TR20TY2	
14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES x NO IF YES, BEFORE OR AFTER THE INCIDENT? after DESCRIBE: damaged: see narrative		13. DEALER'S NAME, ADDRESS & PHONE unknown, gift unknown unknown unknown	
15. PRODUCT PURCHASED NEW x USED DATE PURCHASED 6/91 est. AGE 2 yr. est.		16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: instruction booklet	
17. HAVE YOU CONTACTED THE MANUFACTURER? YES x NO IF NOT, DO YOU PLAN TO CONTACT THEM? YES NO OTHER?	18. IS THE PRODUCT STILL AVAILABLE? YES x NO IF NOT, ITS DISPOSITION Consumer plans to send toaster oven to mfr. (date unknown).		19. MAY WE USE YOUR NAME WITH THIS REPORT? YES x NO
FOR ADMINISTRATION USE			
20. DATE RECEIVED 06/10/93	21. RECEIVED BY (NAME & OFFICE) kgw/hl	22. DOCUMENT NO. H360060A0	
23. FOLLOW-UP ACTION 930825 CCC/523		24. PRODUCT CODE(S)	
25. DISTRIBUTION		26. ENDORSEER'S NAME & TITLE Mei 6/15	

CONSUMER PRODUCT INCIDENT REPORT

H360060A0

6/8/93 Consumer called manufacturer and explained incident to Gloria Fusco (title unknown), who said a mailing carton would be sent to consumer for consumer to return toaster to manufacturer for manufacturer's inspection. Consumer agreed.

UL listing is unknown.

Consumer got CPSC hotline number from Good Housekeeping magazine.